U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

| 1. File Number U 2738 | | | 2. Fiscal Year Covered From: 01 / 01 / 2005 Through: 12 / 31 / 2005 | | | | |
|--------------------------------------------------------|-----------------------|-------------------------------------|----------------------------------------------------------------------|--------------------------|------------------------|-------------|--|
| Name and address of person filing. | | | 4. Name, | file number, and address | of labor organization. | | |
| Name James M. Crowder | | Name United Steelworkers Local 351L | | | | | |
| | | | Labor C | Organization File Number | 003-483 | | |
| P.O. Box, Bldg., Room No., if any | | | P.O. Bo | ox, Building and Room Nu | ımber, if any | | |
| Street | 8920 Sanders Ferry Rd | | Street | 1923 Culver Ro | oad | | |
| City | Tuscaloosa | | City | Tuscaloosa | | | |
| State | Alabama | ZIP Code + 4 35401-9688 | State | Alabama | ZIP Code + 4 | 35401 | |
| 5. Position in labor organization. Recording Secretary | | | | | | | |

Enter appropriate data below lf, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

| A. Held a monetary | n interest in, engaged in transactions (including loans) with, c value from an employer whose employees your organiza | r derived income or other economic benefit of tion represents or is actively seeking to represent. |
|-----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| 6. Name and address of Employer (including trade name, if any). | | 7.a. Nature of Interest, Transaction, or Income. |
| Name | The Credit Union of Alabama A Federal Credit Union | 1. Auto Loan (Truck) 2. Auto Loan (Car) |
| Trade Na | me, if any: | 3. Personal Loan |
| | | 4. Dividend Checking |
| P.O. Box, Bldg., Room No., if any | | |
| | | 7.b. Amount. |
| Street | 1215 Veterans Memorial Parkway | 1. Truck - 5,700.00 |
| City | Tuscaloosa | 2. Car - 17,000.00 |
| | 1 000010000 | 3. Personal - 3,000.00 |
| State | Alabama ZIP Code + 4 35404 | 4. Dividend - 22.00 |
| | | |

Signature

| 15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the |
| undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.) |
| |

Signea

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205-758-2634

Date

3-20-2006

Telephone Number

| Name of Person Filing James M. Crowder | File Number U- |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| B. Held an interest in or derived income or economic benefit with mone substantial part of which consists of buying from, selling or leasing to, of an employer whose employees your labor organization represents o (2) any part of which consists of buying from or selling or leasing direct dealing with your labor organization or with a trust in which your labor or | or otherwise dealing with the business or is actively seeking to represent, or tly or indirectly to, or otherwise |
| 8. Name and address of Business (including trade name, if any). | 9. Business deals with: |
| Name | |
| Trade Name, if any: | a. Labor Organization |
| P.O. Box, Bldg., Room No., if any | b. Trust |
| Street | c. Employer |
| City | |
| State ZIP Code + 4 | |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. | 11.a. Nature of such dealing. |
| Name | |
| Trade Name if any: | |
| | |
| P.O. Box, Bldg., Room No., if any | |
| Street | 11.b. Approximate dollar value of such dealing. |
| City | 12.a. Nature of interest held or income received. |
| State ZIP Code + 4 | |
| | |
| | |
| | |
| | 12.b. Amount. |
| C. Received from any employer (other than an employer cover | ed under parts A and B above) |
| or from any labor relations consultant to an employer any payment of | |
| 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). | 14.a. Nature of payment. |
| Name _ | |
| Trade Name, if any: | |
| P.O. Box, Bidg., Room No., if any | |
| Street | |
| City | |
| State ZIP Code + 4 | |
| | |

14.b. Amount of payment.

13.b. Is the Business an Employer

or Consultant

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